

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	6900	5/11/00
O.I.P.E. CLASSIFIER		TE	3/14/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		W0814	4/25/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1			
2			
3			
4			
5			
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8			
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10			
11			
12			
13			
14			
15			
16			
17	✓	✓	✓
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28	✓	✓	
29		0	0
30			
31			
32			
33			
34			
35			
36			
37			
38		0	0
39		✓	✓
40	✓	✓	✓
41			
42	✓	✓	✓
43			
44			
45			
46			
47			
48			
49			
50	✓	✓	✓

Claim	Final	Original	Date
51	✓	✓	✓
52			
53			
54			
55			
56			
57			
58	✓	✓	
59		0	0
60			
61		0	0
62		0	0
63	✓	✓	
64			
65			
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68			
69			
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71			
72			
73			
74			
75			
76	✓	✓	
77		0	0
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81			
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83			
84			
85		0	0
86		✓	✓
87			
88			
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96			
97			
98			
99			
100	✓	✓	✓

Claim	Final	Original	Date
101	✓	✓	✓
102			
103			
104			
105			
106			
107		0	0
108			
109		0	0
110		0	0
111		✓	✓
112			
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142			
143			
144			
145			
146			
147			
148			
149		✓	✓
150	✓	✓	✓

If more than 150 claims or 10 actions
staple additional sheet here

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